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WILLIAM M SMITH TOWNSEND AND TOWNSEND AND CREW TWO EMBARCADERO CENTER 8TH FLOOR SAN FRANCISCO, CA 941113834

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shall (Deposite	tor's name)
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2004	(Date)

	APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
į	APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
	08/805 813	02/26/1997	ICHIRO MITSUHARA	085760-000	2736	

TITLE OF INVENTION: PATHOGEN-RESISTANT PLANTS AND METHOD FOR PRODUCTION THEREOF

APPLN. TYPE	SMALL ENTITY	ISSUE FE	E	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	nonprovisional NO		ional NO \$1330 \$		\$300	\$1630	04/16/2004
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KUBELIK	L, ANNE R	1638		800-302000			
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Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$)	163

	Complete if Known	
Application Number	08/805,813	
Filing Date	February 26, 1997	
First Named Inventor	Mitsuhara, Ichiro	
Examiner Name	Kubelik, Anne R.	
Art Unit	1638	
Attorney Docket No.	085760-000000US	
	Filing Date First Named Inventor Examiner Name Art Unit	Application Number 08/805,813 Filing Date February 26, 1997 First Named Inventor Mitsuhara, Ichiro Examiner Name Kubelik, Anne R. Art Unit 1638

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1003 530	2003	265	Plant filing fee		102	330	2402	165	Filing a brief in support of an	appear	
1004 770	2004	385	Reissue filing fee	⊣ 1⁴	403	290	2403	145	Request for oral hearing		
1005 160	2005	80	Provisional filing fee	 	451	1,510	1451	1,510	Petition to institute a public u proceeding	ise	
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SUBMITTED BY	٨			Co	omplete (if applicable)
Name (Print/Type) . M	atthew E\Hinsch	Registration No. (Attorney/Agent)	47,651	Telephone	415-576-0200
Signature				Date	April 8, 2004

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Total Number Submission

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Extension

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TRANSMITTAL FORM			Applic	ation Number	08/805,813			
			Filing	Date	February 26, 1997			
			First N	lamed Inventor	Mitsuhara, Ichiro			
(to be used for all correspondence after initial filing)			Art Unit		1638			
				ner Name	Kubelik,	Anne R.		
Total Number of Pages in This Submission				ey Docket Number	085760-0	000000US		
ENCLOSURES (Check all that apply)								
Fee Transmittal Form	ı	Drawin	g(s)		After	Allowance Communication to Group		
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Affidavits/declar	ration(s)	Power	of Attorn	ey, Revocation espondence Address	☐ Statu	s Letter		
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Response to Missing Incomplete Application				l				
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	wnsend and T		nd Crew		:			
or Individual Matthew E. Hinsch				Reg. N	o. 47,651			
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